

# ATTACHMENT 3

## BID/BIDDER CERTIFICATION SHEET

Only an individual who is authorized to bind the bidding firm contractually shall sign the Bid/Bidder Certification Sheet. The signature must indicate the title or position that the individual holds in the firm. This Bid/Bidder Certification Sheet must be signed and returned along with all "required attachments" as an entire package with original signatures. The bid must be transmitted in a sealed envelope in accordance with IFB instructions.

- A. Our all-inclusive bid is submitted in a sealed envelope marked "Bid Submittal - Do Not Open".
- B. All required attachments are included with this certification sheet.
- C. The signature affixed hereon and dated certifies compliance with all the requirements of this bid document. The signature below authorizes the verification of this certification.
- D. The signature and date affixed hereon certifies that this bid is a firm offer for a 90-day period.

### An Unsigned Bid/Bidder Certification Sheet May Be Cause for Bid Rejection

1. Company Name <b>TAHOE VALLEY LODGE</b>	2. Telephone Number <b>530) 541-0353</b>	2a. Fax Number <b>530) 541-0353</b>
2b. Email Address <b>ed@tahoevalleylodge.com</b>		
3. Address <b>2241 Lake Tahoe Blvd. South Lake Tahoe, CA 96150</b>		
Indicate your organization type:		
4. <input checked="" type="checkbox"/> Sole Proprietorship	5. <input type="checkbox"/> Partnership	6. <input type="checkbox"/> Corporation
Indicate the applicable employee and/or corporation number:		
7. Federal Employee ID No. (FEIN)	8. California Corporation No. <b>N/A</b>	
Indicate the Department of Industrial Relations information:		
9. Contractor Registration Number <b>N/A</b>		
Indicate applicable license and/or certification information:		
10. Contractor's State Licensing Board Number <b>N/A</b>	11. PUC License Number CAL-T- <b>N/A</b>	
12. Bidder Name (Print) <b>ED WRIGHT</b>	13. Title <b>OWNER</b>	
14. Signature	15. Date <b>3/16/17</b>	
16. Are you certified with the Department of General Services, Office of Small Business and Disabled Veteran Business Enterprise Services (OSDS) as:		
a. Small Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If yes, enter certification number: _____		
b. Disabled Veteran Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If yes, enter your service code below: _____		
NOTE: A copy of your Certification is required to be included if either of the above items is checked "Yes".		
Date application was submitted to OSDS, if an application is pending: _____		

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

**BID PROPOSAL**

ADM-1412 (REV. 11/2015)

**ATTACHMENT 1**

CONTRACTOR'S NAME (Please Print):			Contract NO. 03A2529	
ITEM NO.	Description	Estimated Nights	Rate Per night (Includes Tax)	TOTAL (Estimated Night Rate Per Night)
	<b>*Winter Season-Sunday Through Thursday*</b>			
1	Standard Room ( Queen size bed minimum; 1 or 2 persons)	1400	\$ 100.-	\$ 140,000
2	<b>*Winter Season-Friday and Saturday*</b>	550	\$ 155	\$ 85,250
	Standard Room ( Queen size bed minimum; 1 or 2 persons)			
3	<b>*Winter Season-Holiday*</b>	80	\$ 195	\$ 15,600
	Standard Room ( Queen size bed minimum; 1 or 2 persons)			
Subtotal This Sheet:				\$ 240,850

(1) THE ABOVE QUANTITIES ARE ESTIMATES ONLY AND ARE GIVEN AS A BASIS FOR COMPARISON OF BIDS. NO GUARANTEE IS MADE OR IMPLIED AS TO THE EXACT QUANTITY THAT WILL BE NEEDED

(2) IN CASE OF A DISCREPANCY BETWEEN THE UNIT PRICE AND THE TOTAL SET FORTH FOR A UNIT BASIS ITEM, THE UNIT PRICE SHALL PREVAIL.

(3) ANY ALTERATIONS, MODIFICATIONS OR CHANGES TO THIS BID PROPOSAL SHEET BY THE PROPOSER MAY BE GROUNDS FOR BID REJECTION.

(4) EACH LINE MUST BE BID. DO NOT LEAVE ANY UNIT PRICE COLUMN BLANK OR THIS BID WILL BE DISQUALIFIED FROM COMPETITION FOR CONTRACT AWARD.

See Exhibit A, Section 7.F.

"HOLIDAYS" are defined as State Holidays established and observed by the State of California

\* Winter Season covers October 1 through April 30

\*\* Summer Season covers May 1 through September 30.

This is a multiple provider contract. Only the lowest responsive bidder's total cost will be used for the maximum amount of the agreement. Contractors will be paid their rates in accordance with their bids, Attachment 1, Bid Proposal and Exhibit B, Budget Detail and Payment Provisions.

STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION

**BID PROPOSAL**

ADM-1412 (REV. 11/2015)

**ATTACHMENT 1**

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ITEM NO.	Description	Estimated Nights	Rate Per night (Includes Tax)	TOTAL (Estimated Night Rate Per Night)
	<b>**Summer Season-Sunday Through Thursday**</b>			
1	Standard Room ( Queen size bed minimum; 1 or 2 persons)	800	\$ 75	\$ 60,000
2	<b>**Summer Season-Friday and Saturday**</b>	320	\$ 80	\$ 25,600
	Standard Room ( Queen size bed minimum; 1 or 2 persons)			
3	<b>**Summer Season-Holiday**</b>	20	\$ 175	\$ 3,500
	Standard Room ( Queen size bed minimum; 1 or 2 persons)			
Subtotal This Sheet:				\$ 89,100

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